Entity	Name: CRESCENT	PARK HOMEOWN	VERS ASSOCIATION	I, INC.

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# Current Principal Place of Business:

931 S SEMORAN BLVD SUITE 214 WINTER PARK, FL 32792

## **Current Mailing Address:**

DOCUMENT# N9500000091

931 S SEMORAN BLVD SUITE 214 WINTER PARK, FL 32792 US

## FEI Number: 59-3308141

### Name and Address of Current Registered Agent:

HARA MANAGEMENT, INC. 931 S SEMORAN BLVD SUITE 214 WINTER PARK, FL 32792 US Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:	ROBERT HARA		
	Electronic Signature of Registered Agent		Date
Officer/Direc	tor Detail :		
Title	VP	Title	P/D
Name	TALBOT, LAURIE H	Name	MCLOUTH, MIKEL
Address	931 S. SEMORAN BLVD- STE 214	Address	931 S. SEMORAN BLVD- STE 214
City-State-Zip:	WINTER PARK FL 32792	City-State-Zip:	WINTER PARK FL 32792
Title	D	Title	D
Name	OWENS, DIANNA K	Name	PETERS, ROY
Address	931 S. SEMORAN BLVD- STE 214	Address	931 S. SEMORAN BLVD- STE 214
City-State-Zip:	WINTER PARK FL 32792	City-State-Zip:	WINTER PARK FL 32792
Title	D	Title	TREASURER
Name	MYERS, CHARLES	Name	EATON, JOANN M
Address	931 S. SEMORAN BLVD- STE 214	Address	931 S. SEMORAN BLVD- STE 214
City-State-Zip:	WINTER PARK FL 32792	City-State-Zip:	WINTER PARK FL 32792
Title	S/D	Title	DIRECTOR
Name	WONGMANEE, SUTHATHIP	Name	KINGSLAND, JACQUELINE C
Address	931 S. SEMORAN BLVD- STE 214	Address	931 S. SEMORAN BLVD- STE 214
City-State-Zip:	WINTER PARK FL 32792	City-State-Zip:	WINTER PARK FL 32792

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MIKEL MCLOUTH		PRESIDENT	03/25/2015
	Electronic Signature of Signing Officer/Director Detail		Date

FILED Mar 25, 2015 Secretary of State CC1420293167

### **Officer/Director Detail Continued :**

Title	D
Name	CAVELLERI , ROBERT J
Address	931 S. SEMORAN BLVD. SUITE 214
City-State-Zip:	WINTER PARK FL 32792